We claim:

1. A method of treating a disease characterized by an undesirable amount of cell proliferation, comprising:

administering an effective amount of chemokine PARC to a patient who has a proliferative cell disorder, whereby undesirable proliferation of cells is reduced.

2. The method of claim 1 wherein the syndrome is cancer.
3. The method of claim 1 wherein the syndrome is an autoimmune disease.
4. The method of claim 1 wherein the syndrome is rheumatoid arthritis.
5. The method of claim 1 wherein the syndrome is an myeloproliferative disease.
6. The method of claim 1 wherein the syndrome is coronary artery disease.
7. A method of diagnosing a proliferative cell disorder in a patient, comprising:

determining in a test sample from a patient amount of PARC; and

comparing the amount to an average amount found in a control sample of a population of healthy humans, wherein a decreased amount in the test sample relative to the average amount indicates an proliferative cell disorder in the patient.

8. The method of claim 7 wherein the syndrome is cancer.
9. The method of claim 7 wherein the syndrome is an autoimmune disease.
10. The method of claim 7 wherein the syndrome is rheumatoid arthritis.
11. The method of claim 7 wherein the syndrome is a myeloproliferative disease.
12. The method of claim 7 wherein the syndrome is coronary artery disease.
13. The method of claim 7 wherein the test sample is selected from the group consisting of serum, plasma, lymph fluid, peripheral lymphatic tissue, and blood.
14. The method of claim 7 wherein the test sample comprises dendritic cells.
15. The method of claim 7 wherein the test sample comprises Langerhans cells.
16. The method of claim 7 wherein the test sample comprises monocytes.
17. The method of claim 7 wherein an increased amount is at least two-fold more in the test sample than in the control sample.

18. The method of claim 7 wherein an increased amount is at least three-fold more in the test sample than in the control sample.
19. The method of claim 7 wherein an increased amount is at least four-fold more in the test sample than in the control sample.
20. The method of claim 7 wherein said step of determining employs an array of a first set of antibodies for capturing PARC.
21. The method of claim 20 wherein said step of determining employs a second set of antibodies which is applied to the array after binding of PARC in the test sample to the first set of antibodies.
22. The method of claim 21 wherein said second set of antibodies comprises covalently attached oligonucleotides.
23. The method of claim 21 wherein a third set of antibodies is applied to the array that specifically binds to the second set of antibodies.
24. The method of claim 23 wherein the third set of antibodies comprises covalently attached oligonucleotides.
25. The method of claim 24 wherein rolling circle amplification is performed using said oligonucleotides as primers.
26. A method of stimulating mitosis, comprising:

administering an inhibitory molecule for chemokine PARC to a subject in need of augmented mitosis, wherein the inhibitory molecule is selected from the group consisting of antibodies specific for chemokine PARC and antisense molecules which bind to and inhibit transcription of PARC mRNA, whereby mitosis in the subject is increased.

27. A method to monitor the effects of PARC or anti-PARC therapy, comprising:

(a) measuring amount of one or more protein selected from the group consisting of AR, IL-1sR1, IL-2, IL-6sR, LIF, SDF-1a, and fragments thereof in a sample collected from a patient at a first time;

(b) repeating step (a) in a sample collected from the patient at a later time;

(c) comparing the amounts measured in step (a) and in step (b), wherein an decreased amount over time denotes an effect of PARC and a increased amount denotes an effect of an anti-PARC inhibitory molecule.